

Independent Telecommunications Consultants

June 30, 2014

Ms. Marlene H. Dortch
Office of the Secretary
Federal Communications Commission
445 12th Street SW
Washington, DC 20554

Barcy McNeal
Executive Secretary
Ohio PUC
180 East Broad Street
Columbus, OH 43215

Re: High-Cost and Low Income Recipients WC Docket No. 10-90,11-42 and 14-58: Form 481 - Annual Reporting Requirements for

enclosed is a redacted version of Form 481 Annual Reporting Requirements and Certifications for and 14-58. designated ETC, and as such, is submitting to the Commission information from FCC Form 481 A confidential "Trade Secret" filing of this information was also made under Docket 10-90, 11-42 Minford Telephone Company, Study Area Code 300634. Minford Telephone Company is a state-Pursuant to Section 54.313 and 54.422 of the Federal Communications Commission's rules,

phone at 320/848-6641. Should you have any questions, please contact me via e-mail at roxih@interstatetelcom.com or by

Roxi Hacker

Regulatory Consultant

Enclosures:

Cc: Paula McGraw

\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(check to indicate certification) (complete attached worksheet)		<3000>
	(complete attached worksheet) eet	Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet	
	et Irriers	Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	\2000\ F
	(complete attached worksheet) (complete attached worksheet)	Terms and Condition for Lifeline Customers	<1110> <1200>
\ 	(if not, check to indicate certification)	Terrestrial Backhaul (Y/N)? (if not	<1100>
\ 	(attach descriptive document)		<1010>
	(complete attached worksheet) (camplete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (aheck to indicate certification)	Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability 3006340H1010Minford.pdf	<710> (<710> (<800> (<900> 1<1000> (
	Constitution of the case of th		
	(check to indicate certification) (attached descriptive document)	Functionality in Emergency Situations 3006340H610Minford.pdf	<600> F
<	(attached descriptive document)		<510>
	(check to indicate certification)	onsumer Protection Rules Compliance	
		Number of Complaints per 1,000 customers (broadband) Nobile Mobile Mobile O.0 O.0 O.0 Mobile O.0 O.0	<410> <420> <430> <440> <450>
(attach descriptive document)	(attach desc	Detail on Attempts (broadband)	_
\ 		Unfulfilled Service Requests (broadband)	<320> L
(attach descriptive document)	(ottach descr	Detail on Attempts (voice)	<310> D
<		Unfulfilled Service Requests (voice)	
\ \ \	(complete attached worksheet)	Outage Reporting (voice) (c) (d) (d) (d)	<200> C
(cneck box when complete)	(complete attached worksheet)	Service Quality Improvement Reporting	<100> S
54.313 54.422 Completion Completion Required Required		ANNUAL REPORTING FOR ALL CARRIERS	ANNUAL
	n.com	Contact Email Address: roxih@interstatetelcom.com	<039> (
		Contact Telephone Number: 3208486641 ext. Number of the person identified in data line <030>	<035> (
		Contact Name: Person USAC should contact Roxi Hacker	<030> (
		Program Year 2015	<020> F
		Study Area Name MINFORD TEL CO	<015> \$
		100634	- 11
OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	OMB Control N July 2013	FCC Form 481 - Carrier Annual Reporting Data Collection Form	FCC Form

	rvice Quality Improvement Reporting Ilection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	300634			
<015>	Study Area Name	MINFORD TEL	СО		
<020>	Program Year	2015			
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker	:		
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641	ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@inter	statetelcom.com		
<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	(уе	es/no) O		
<111>	year plan" filed with the FCC?	(ye	es / no) O O		
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service.	company is a	3006340H110Minford.pdf		
	Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ne		Name of Attached Document	
<113>	Maps detailing progress towards meeting plan targets				
<114>	Report how much universal service (USF) support was received				
<115>	How (USF) was used to improve service quality				
<116>	How (USF)was used to improve service coverage				
<117>	How (USF) was used to improve service capacity				
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.				

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300634
<015>	Study Area Name	MINFORD TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com

<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
	NORS									Did This Outage		
	Reference		Outage Start			Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected		Affected	Description (Check		Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures

(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	300634
<015>	Study Area Name	MINFORD TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com

<701> Residential Local Service Charge Effective Date

<702> Single State-wide Residential Local Service Charge

<703>

>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
Γ					Residential Local			Mandatory Extended Area	
F	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
L									
ı									
F									
F									
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L					See at	tached worksheet			
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(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300634
<015>	Study Area Name	MINFORD TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attacl	ned				
			,	worksheet -	•				

. , .	erating Companies lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code		300634	
<015>	Study Area Name		MINFORD TEL CO	
<020>	Program Year		2015	
<030>	Contact Name - Person I	JSAC should contact regarding this data	Roxi Hacker	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	3208486641 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	roxih@interstatetelcom.com	
<810>	Reporting Carrier	Minford Telephone Company		
<811>	Holding Company			
<812>	Operating Company	Minford Telephone Company		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
:			
•	See atta	sched workshe	et
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	bal Lands Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015> <020> <030> <035> <039>	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <03 Contact Email Address - Email Address of person identified in data line <03 Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document
to confi	company serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to 3(a)(9) includes:	Select (es,No, NA)
<921> <922> <923> <924> <925> <926> <927> <926> <927> <928> <929>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.	

	o Terrestrial Backhaul Reporting ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300634	
<015>	Study Area Name	MINFORD TEL CO	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com	
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)		
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

	erms and Condition for Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Col	lection Form			July 2013
<010>	Study Area Code		300634	
<015>	Study Area Name		MINFORD TEL CO	
<020>	Program Year		2015	
<030>	Contact Name - Person USAC should contact regarding this data		Roxi Hacker	
<035>	Contact Telephone Number - Number of person identified in data l	ine <030>	3208486641 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030>	roxih@interstatetelcom.com	
		г	3006340H1210Minford.pdf	
			3006340H1210M1nford.pdf	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
				Name of Attached Document
<1220>	Link to Public Website	HTTP		
		_		
# DI				
	heck these boxes below to confirm that the attached document(s), on line	1210,		
	ebsite listed, on line 1220, contains the required information pursuant to			
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must	st		
annually	report:			
412215	Information departing the torms and conditions of any value			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	✓		
	terepriority service plans offered to Elicinic subscribers,			
<1222>	Details on the number of minutes provided as part of the plan,	_ ✓		
<1223>	Additional charges for toll calls, and rates for each such plan.	_		
	3	<u> </u>		

(2000) Pr	rice Cap Carrier Additional Documentation		FCC Form 481
Data Coll	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Includina	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013
4010s	Christia Anna Carla		
<010> <015>	Study Area Code Study Area Name	300634	
<020>	Program Year	MINFORD TEL CO	
<030>	Contact Name - Person USAC should contact regarding this data	2015 Roxi Hacker	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com	
		TOXINGINEOUS CACCOCCIONI. COM	
CHECK ti	he boxes below to note compliance as a recipient of Incremental Connect Amer		•
	support as set forth in 47 Crk 9 54.515(b),(c),(a),(e) the information reported on this form and in the doc	iments attached below is accurate.
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}		
<2011>	3rd Year Certification {47 CFR § 54.313(b)(2)}	<u> </u>	
	3 3 3 3 3 3 3 3 3 3		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
2046	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}	T	
<2016>	Certification Support Used to Build Broadband	<u>IL</u>	
	Connect America Phase II Reporting {47 CFR § 54.313(e)}		_
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached document(s), on pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providi preceding calendar year.	shall provide the number, names, and	
<2021>	Interim Progress Community Anchor Institutions		
	-		
		<u> </u>	
		Name of Attached	Document Listing Required Information

(3000) R	ate Of Return Carrier Additional Documentation		FCC Form 481
Data Col	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
- <010>	Study Area Code	300634	
<015>	Study Area Name	MINFORD TEL CO	
<020>	Program Year	2015	
<030> <035>	Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Roxi Hacker	
<039>	Contact Freephone Number - Number of person identified in data line <030>	3208486641 ext. roxih@interstatetelcom.com	
CHECK t	he boxes below to note compliance on its five year service quality plan (pursua		uring compliance with the financial reporting requirements set forth in A
OI I E OI I		he information reported on this form and in the documents	
(05:-:	Drogress Popert on E Veer Blon		
(3010)	Progress Report on 5 Year Plan Milestone Certification {47 CFR § 54.313(f)(1)(i)}		
	Milestone certification (47 crit § 54.515(1)(1)(1))	Name of Attached Document Listing Required I	nformation
		- '	
(3011)	Please check this box to confirm that the attached document(s), on line § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and add providing access to broadband service in the preceding calendar year.		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}		
		Name of Attached Document Listing Required Information	
(2012)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	(O)(O)
, ,	If yes, does your company file the RUS annual report	(Yes/No)	
		7 contains the required information pursuant to \$ E4.3:	12(f)(2) compliance requires:
	check these boxes to confirm that the attached document(s), on line 30°	7, contains the required information pursuant to § 54.3	13(1)(2) compliance requires:
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		4
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows	
	(,,		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation		
		Name of Attached Document Listing Required Informatio	n
(3018)	If the response is no on line 3014, Is your company audited?	(Yes/No	· (•)(·)
	If the response is yes on line 3018, please check the boxes below to		
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
(3019)	$\dot{E}ither~a~copy~of~their~audited~financial~statement;~or~(2)~a~financial~report~~in~a$	format comparable to RUS Operating Report for Telecommun	ications 🚺
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of C	Cash Flows	√
(3021)	Management letter issued by the independent certified public accountant tha	t performed the company's financial audit.	
	If the response is no on line 3018, please check the boxes below		
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2),		
	contains:		
(3022)	Copy of their financial statement which has been subject to review by an		
	independent certified public accountant; or 2) a financial report in a		<u></u>
	format comparable to RUS Operating Report for Telecommunications Borrowers,		
(3023)	Underlying information subjected to a review by an independent certified		
(3023)	public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of C		
		3006340H3000Minford.pdf	
(3026)	Attach the worksheet listing required information		
(3020)	Account the worksheet hading required illiorination		
	•	Name of Attached Document Listing Required Information	

Certificat	Certification - Reporting Carrier	FCC Form 481
Data Coll	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	<010> Study Area Code	300634
<015>	<015> Study Area Name	MINFORD TEL CO
<020>	<020> Program Year	2015
<030>	<030> Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	<035> Contact Telephone Number - Number of person identified in data line <030> 3208486641 ext.	3208486641 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> roxih@interstatetelcom.com	roxih@interstatetelcom.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.
Name of Reporting Carrier:
Signature of Authorized Officer: Date
Printed name of Authorized Officer:
Title or position of Authorized Officer:
Telephone number of Authorized Officer:
Study Area Code of Reporting Carrier: Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

300634

<010>	<010> Study Area Code	300634
<015>	<015> Study Area Name	MINFORD TEL CO
<020>	<020> Program Year	2015
<030>	<030> Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	<035> Contact Telephone Number - Number of person identified in data line <030> 3208486641 ext.	3208486641 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> roxih@interstatetelcom.com	roxih@interstatetelcom.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent). ITCI is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.
Name of Authorized Agent: ITCI
Name of Reporting Carrier: MINFORD TEL CO
Signature of Authorized Officer: CERTIFIED ONLINE Date: 06/30/2014
Printed name of Authorized Officer: Paula McGraw
Title or position of Authorized Officer: General Manager
Telephone number of Authorized Officer: 7408202151 ext.
Study Area Code of Reporting Carrier: 300634 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.
Name of Reporting Carrier: MINFORD TEL CO
Name of Authorized Agent or Employee of Agent: ITCI
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE Date: 06/30/2014
Printed name of Authorized Agent or Employee of Agent: Roxi Hacker
Title or position of Authorized Agent or Employee of Agent Regulatory Consultant
Telephone number of Authorized Agent or Employee of Agent: 3208486641 ext.
Study Area Code of Reporting Carrier: 300634 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Attachments

REDACTED:

Minford Telephone Company
Five Year Quality of Service Plan
2015-2019

State: Ohio

Minford Telephone Company

Form 481 Line No.: 510 Compliance with Service Quality Standards and Consumer Protection

company operating procedures and tariffs which are in compliance with applicable Ohio Public Utility Commission orders and rules including: Service (BLES)" the local services provided by Minford Telephone Company are provided under internal As required by Ohio Administrative Code "4901: 1-6-12 Service Requirements for Basic Local Exchange

4901: 1-6-12(C)

- completed application for new access line service, unless the customer requests or agrees to a later BLES shall be installed within five business days of the receipt by a telephone company of a
- following exist: The requirement to install BLES in paragraph (C)(1) of this rule is not applicable where any of the
- (a) A customer or applicant has not met pertinent tariff requirements.
- (b) The need for special equipment or service.
- (c) Military action, war, insurrection, riot, or strike
- (d) The customer misses an installation appointment.
- Sundays and legal holidays, after the outage is reported to the telephone company. (3) A LEC shall make reasonable efforts to repair a BLES outage within twenty-four hours, excluding
- it is reported to the telephone company. A BLES service outage or service-affecting problem shall be repaired within seventy-two hours after
- charges for BLES LEC shall credit every affected BLES customer, of which the LEC is aware, in the amount of one month's If a BLES outage is reported to the telephone company and lasts more than seventy-two hours, the
- repair occurs as a result of any of the following: The customer credit in paragraph (C)(5) of this rule is not applicable if the condition or failure to
- (a) A customer's negligent or willful act.
- (b) Malfunction of customer-owned telephone equipment or inside wire
- (c) Military action, war, insurrection, riot, or strike
- (d) Customer missing a repair appointment.

State: Ohio

Minford Telephone Company

Form 481 Line No.: 510 Compliance with Service Quality Standards and Consumer Protection

- actually enters the mail. bill rather than on the envelope, as long as the postmark date is never earlier than the date the bill the bill is postmarked for a bill for BLES provided to customers. The postmark date may appear on the No LEC shall establish a due date for payment earlier than fourteen consecutive days after the date
- of the disconnection seven days before the disconnection. than fourteen days after the due date of the customer's bill, provided that the customer is given notice A LEC may disconnect BLES for nonpayment of any amount past due on a billed account not earlier
- customer's regular bill language. The notice shall identify the total dollar amount that must be paid to provided that the disconnection language is clearly highlighted such that it stands apart from the postmarked at least seven days prior to the date of disconnection of service reflected on the bill, and maintain BLES, the earliest date disconnection may occur, and the following statement: Such notice of disconnection may be included on the customer's next bill, provided the bill is

impaired customers may contact the PUCO via 7-1-1 (Ohio Relay Service)." customers may contact the public utilities commission of Ohio (PUCO) for assistance at 1-800-686-7826 called Minford Telephone Company, or for general utility information, residential and (toll free) from eight a.m. to five p.m. weekdays, or at http://www.puco.ohio.gov. Hearing or speech "If you have a complaint in regard to this disconnection notice that cannot be resolved after you have

For residential disconnection notices, the text shall also include:

PUCO. The OCC can be contacted at 1-877-742-5622 (toll free) from eight a.m. to five p.m. weekdays, or at http://www.pickocc.org." "The Ohio consumers' counsel (OCC) represents residential utility customers in matters before the

- one month's service charges, for the installation of BLES for any person that it determines, in its discretion, is not creditworthy. (10) A LEC may require a deposit, not to exceed two hundred thirty percent of a reasonable estimate of
- day the earlier of the following occurs: service was disconnected for nonpayment of past due charges not later than one business day after the control or unless the customer requests otherwise, reconnect a customer whose basic local exchange (11) A LEC shall, unless prevented from doing so by circumstances beyond the telephone company's
- (a) The receipt by the LEC of the full amount of past due charges.
- <u>b</u> The receipt by the LEC of the first payment under a mutually agreed upon payment arrangement.

State: Ohio

Minford Telephone Company

Form 481 Line No.: 610 Description of Functionality in Emergency Situations

Minford Telephone Company, pursuant to Ohio Administrative Code "4901:1 1-6-31 Emergency and Outage Operations"

4901:1-6-31 Emergency and outage operations.

- shall submit outage reports utilizing, at the company's discretion, either existing FCC reports or a format commission will utilize existing FCC rules applicable to emergency and outage operations. Companies determined by the commission. continue to provide customers with the ability to originate and receive calls at all times. Each facilities-based local exchange carrier (LEC) shall design, operate, and maintain its facilities to The
- experienced and outage, whenever that outage occurs on any facility that it owns, operates, leases or otherwise utilizes and is both: coordinator and when appropriate, Each facilities-based LEC shall submit, within two hours of discovery, to the commission's outage the news media in the affected area, a notification that it has
- (1) Expected to last for a period in excess of thirty minutes
- (2) Potentially affects at least nine hundred thousand user minutes in the incumbent local calling area.
- services, which impairs 9-1-1 service within a given county 9-1-1 system, immediately to each county 9- $\widehat{\mathbb{C}}$ area, when appropriate. 1-1 public safety answering point, to the Ohio 9-1-1 coordinator, and to the news media in the affected Each facilities-based LEC shall report, by telephone or electronic means, a disruption of 9-1-1
- the at that facility; and the LEC shall convey to that person all available information that may be useful to by the management of the affected 9-1-1 facility as the LEC's contact person for communication outages also notify, as soon as possible, by telephone or electronic means, any official who has been designated safety answering point, as a result of an outage described under paragraphs (B) and (C) of this rule, shall communicate with that facility. management of the affected facility in mitigating the Each facilities-based LEC experiencing a loss of communications or selective routing to a public effects of the outage on efforts to
- provided to the FCC or the following information: rule, shall electronically submit to the commission's outage coordinator the same information as that Each facilities-based LEC experiencing an outage described under paragraphs (B) and (C) of this

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Minford Telephone Company

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service affected, the geographic area affected by the outage, the number of customers affected, an entity, the date and time of the onset of the outage, a brief description of the problem, the particular number by which the commission's outage coordinator may contact the reporting entity. estimate of when the service, including 9-1-1, will be restored, and a contact name and telephone A notification that it has experienced an outage, which shall include the name of the reporting

- in good faith. report, which shall include all pertinent information then available on the outage and shall be submitted Not later than seventy-two hours after discovering the outage, an initial communications outage
- initial report. including any information that was not contained in, or that has changed from that provided in, the final communications outage report, which shall include all pertinent information Not later than thirty days after discovering the outage, the provider shall submit electronically a on the outage,
- following: available for review by commission staff. Each facilities-based LEC shall develop, implement, and maintain an emergency plan and make it The plan shall include, but not be limited to, all of the
- the federal telecommunications service priority program, as identified in 47 C.F.R. 64, appendix A Procedures for maintaining and annually updating a list of those customers who have subscribed to
- customers with a documented medical or life-threatening condition. Procedures for priority treatment in restoring out-of-service trouble of an emergency nature for
- such as police and fire stations, hospitals, key medical personnel, and other utilities. Such procedures shall include a table of restoration priority, including, but not limited to, subscribers procedures regarding those customers who require priority treatment for out-of-service clearance. In addition to the telecommunications service priority program, each LEC shall develop policies and
- Procedures for restoring service to priority critical facilities customers
- measures to protect its personnel and facilities (5) Identification and annual updates of all of the facilities-based LEC's critical facilities and reasonable
- capabilities. Assessments and evaluations of telecommunications facilities available to provide back-up service

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- the response to the emergency, and deficiencies in the emergency plan. Procedures for after-action assessments and reporting following activation of any part of the An after-action report will be written and will include lessons learned, deficiencies in
- to its ability to provide telecommunications service. personnel to contact and coordinate with in the event of any real or anticipated local or national threats 8 A current list of the names and telephone numbers of the facilities-based LEC's emergency service
- personnel that is made available to the commission's emergency coordinator, upon request. A current list of the names and telephone numbers of the facilities-based LEC's emergency service
- large scale event in which staffing is reduced. Such plans shall provide for: (10) A continuity of operations plan to assure continuance of minimum essential functions during a
- widespread transmission within the United States, or a case at one or more locations within Ohio Plan activation triggers such as the world health organization's pandemic phase
- preparedness and response planning. Identification of a pandemic coordinator and team with defined roles and responsibilities for
- progressive stages associated with a declining workforce. Identification of minimal essential functions, minimal staffing required to maintain such essential and personnel resource pools required to ensure continuance of those functions
- subcontractor services/products, and logistics) required to maintain business operations by location and Identification of essential employees and critical inputs (e.g., raw materials, equipment, suppliers,
- (e) Policies and procedures to address personal protection initiatives
- (f)Ohio during a declared emergency. Policies and procedures to maintain lines of communication with the public utilities commission of
- in the after-action assessment report required under paragraph (F)(7) of this rule Each facilities-based LEC shall amend its emergency plan in accordance with the findings identified

(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300634
<015>	Study Area Name	MINFORD TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com
<701>	Residential Local Service Charge Effective Date 1/1/2014	

<703>

<702> Single State-wide Residential Local Service Charge

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
OH	740-820 Minford/Stockdale		FR	17.0	0.0	0.0	0.0	17.0

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	300634
<015>	Study Area Name	MINFORD TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Roxi Hacker
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208486641 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	roxih@interstatetelcom.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	ОН	740-820 Minford/Stockdale	62.99	0.0	62.99	4.0	1.5	0.0	Other, Unlimited Data - Usage Allowance n/a
	ОН	740-820 Minford/Stockdale	79.99	0.0	79.99	5.0	1.5	0.0	Other, Unlimited Data - Usage Allowance n/a
							I		

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		300634
<015>	Study Area Name		MINFORD TEL CO
<020>	Program Year		2015
<030>	Contact Name - Person US	AC should contact regarding this data	Roxi Hacker
<035>	> Contact Telephone Number - Number of person identified in data line <030>		3208486641 ext.
<039>	Contact Email Address - Em	nail Address of person identified in data line <030>	roxih@interstatetelcom.com
<810>	Reporting Carrier	Minford Telephone Company	
<811>	Holding Company		
<812>	Operating Company	Minford Telephone Company	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	Falcon1 Inc.		Farlcon1
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LINE 1010 – VOICE SERVICES RATE COMPARABILITY

The Wireline Competition Bureau's most recent reasonable comparability benchmark for voice services is \$46.96, which includes the federal subscriber line charge ("SLC").

Company's pricing of fixed voice services is less than the reasonable comparability benchmark of SLC (\$6.50) and other state fees are included, the rate becomes \$23.67. Therefore, the local rate, including any mandatory extended area service charge, is \$17.00. When the federal In all of the exchanges served by the Minford Telephone Company, the single-line residential

State: Ohio

Minford Telephone Company

Form 481 Line No.: 1210 Terms and Conditions of Voice Telephony Lifeline Plans

- Ohio. Minford Telephone Company's Lifeline service offerings are listed in their Local Service Tariff Section 4, Sheet 1 (attached). The Local Service Tariff is on file with the Public Utility Commission of
- All Lifeline subscribers must meet the terms and conditions of Federal Lifeline Eligibility Rules

shall provide Lifeline service as defined in 47 C.F.R. §54.401(a) on a non-discriminatory basis to all qualifying and the Ohio State law listed below low-income customers. The company's Lifeline service offering will comply with all applicable federal laws As required by Ohio Administrative Code "4901:1-6-19 Lifeline Requirements" Minford Telephone Company

4901:1-6-19 Lifeline requirements.

- eligible residential customers. 47 C.F.R. 54.201 shall implement lifeline service throughout the ILEC ETC's traditional service area for its An incumbent local exchange carrier (LEC) that is an eligible telecommunications carrier (ETC) under
- shall provide all of the following: Lifeline service shall be a flat-rate, monthly, primary access line service with touch-tone service and
- contribution of federally available assistance; A recurring discount to the monthly basic local exchange service rate that provides for the maximum
- (2) Free blocking of toll service, 900 service, and 976 service;
- (3) A waiver of the federal universal service fund end user charge,
- <u>4</u> A waiver of the telephone company's service deposit requirement
- service at the prevailing prices, less the lifeline discount. 0 The ILEC ETC may offer to lifeline service customers any other services and bundles or packages of
- due bills for regulated local service charges, with the initial payment not to exceed twenty-five dollars service with another toll provider. restricted service until the past due toll service charges have been paid or until the customer establishes monthly payments. before service is installed, and the balance for regulated local service charges to be paid over six, equal The ILEC ETC also shall offer special payment arrangements to lifeline service customers that have past Lifeline service customers with past due bills for toll service charges shall have toll

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and outreach regarding lifeline service and only for those purposes and not for any administrative costs of spent. All funds allocated to this budget shall be spent for the promotion and marketing of lifeline service appropriate budget for promoting lifeline and performing outreach and regarding how the budget will be with the advisory board established in paragraph (F) to reach consensus, where possible, regarding an promoting lifeline service and performing outreach regarding lifeline service. implementing lifeline service Every large ILEC required to implement lifeline service shall establish an annual marketing budget for Every large ILEC shall work

- decisions of the advisory board including decisions on how the lifeline marketing, promotion, and outreach commission's staff shall make the final determination. Decisions on the organization of the board and marketing of, and outreach regarding lifeline service. board to reach consensus on the organization of the board and all activities relating to the promotion of, statewide board and the development of procedures and bylaws under which the board will operate public utilities commission, the office of the consumer's counsel (OCC), consumer groups representing low provided by the large ILECs shall be coordinated through a single advisory board composed of staff of the Commission staff shall, with the assistance of the office of the consumers' counsel, work with the advisory income constituents, two representatives from the Ohio association of community action agencies, and activities are implemented are subject to commission review. All activities relating to the promotion of, marketing of, and outreach regarding lifeline service The commission staff shall provide active leadership in the initial organization of the However, where consensus is not possible,
- with rule 4901:1-6-11 of the Administrative Code. requirements. The rates, terms, and conditions for the ILEC's lifeline service shall be tariffed in accordance All other aspects of an ILEC ETS's state-specific lifeline service shall be consistent with federal
- Eligibility for lifeline service under this rule shall be based on either of the following criteria
- limits assistance based on household income. These programs include: An individual's verifiable participation in any federal or state low-income assistance program that
- might supplant medicaid; Medical assistance under Chapter 5111. of the Revised Code (medicaid) or any state program that
- **b** Supplemental nutritional assistance program (SNAP/food stamps);
- (C) Supplemental security income (SSI) under Title XVI of the Social Security Act;
- (d) Social security disability insurance blind and disabled (SSDI);
- (e) Federal public housing assistance, or section 8;

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- (f) Home energy assistance programs (HEAP, LIHEAP, E-HEAP);
- (g) National school lunch program's free lunch program (NSL);
- Ξ Temporary assistance for needy families (TANF/Ohio works); or
- (i) General assistance, including disability assistance (DA).

The commission may add or remove programs from this list as required by federal or state law

- federal law, examples of acceptable documentation include the following: the federal poverty level. Other verification that an individual's household income is at or below one hundred fifty per cent of ILEC ETC's may use any reasonable method of verification. Consistent with
- (a) State or federal income tax return;
- (b) Current income statement or W-2 from an employer;
- (c) Three consecutive months of current pay stubs;
- (d) Social security statement of benefits;
- (e) Retirement/pension statement of benefits;
- $\widehat{\mathbf{f}}$ Unemployment/workmen's compensation statement of benefits;
- 9 Any other legal document that would show current income (such as a divorce decree or child support
- household income-based requirements. (FCC) requirements in 47 C.F.R. 54, to enroll customers into lifeline assistance who qualify through All ILEC ETCs must verify customer eligibility consistent with the federal communications commission's
- individual's eligibility and the data necessary to automatically enroll eligible persons for lifeline service income assistance programs and with carriers to negotiate and acquire information necessary to verify an The commission shall work with the appropriate state agencies that administer deferral or state low-
- $\widehat{\geq}$ program. ILEC ETC shall automatically enroll customers into lifeline assistance who participate in To the extent that appropriate state agencies are able to accommodate automatic enrollment, every a qualifying

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- for lifeline service enrollment and shall provide the person an additional thirty days to provide eligibility. An ILEC ETC shall provide written notification if the carrier determines that an individual is not eligible
- eligibility or dispute the carrier's findings regarding termination of the lifeline service. and shall provide the customer an additional sixty days to submit acceptable documentation of continued be terminated due to failure to submit acceptable documentation for continued eligibility for the assistance (M) An ILEC ETC shall provide written customer notification if a customer's lifeline service benefits are to
- notice shall submit its proposed notice to commission staff for approval. that are compliant with the FCC's requirements. Any ILEC ETC choosing to create and use its own customer Commission staff will maintain on the commission's website a copy of boilerplate customer notices
- of the periodic ETC certification process by the commission, that they comply with the FCC's requirements. and income-based criteria consistent with the FCC's requirements in 47 C.F.R. 54.409 to 47 C.F.R. 54.410. ILEC ETCs shall maintain records to document compliance with these requirements and shall attest, as part An ILEC ETC shall establish procedures to verify an individual's continuing eligibility for both program
- approved by the commission under this paragraph. The surcharge may not include recovery of expenses other lifeline service expenses that are not recovered through federal or state funding and that are telecommunications service other than lifeline service customers, any lifeline service discounts and any of the following means: related to the marketing and promotion of lifeline service. The surcharge may be established through one An ILEC ETC may recover through a customer billing surcharge on retail customers of the ILEC's
- approved and become effective on the thirty-first day or later date if requested by the company. available assistance, and recurring retail price differences between the frozen lifeline service rate and connection charges, blocking of 900/976, recurring discount maximizing the contribution of federally recovered through federal or state funding such as federal universal service fund end user charges, service compliance with this rule. Absent suspension or other commission action, the application shall be deemed lifeline customers. An applicant must provide documentation to supports its proposed surcharge and its funding such as administrative expenses for the sole purpose of verifying the eligibility and enrolling of residential BLES rtes, as well as lifeline service expenses that are not recovered through federal or state for tariff amendment (ATA). Such application may request recovery of lifeline service discounts that are not recover lifeline service discounts and expenses identified in this paragraph shall file a thirty-day application An ILEC ETC that chooses to establish a customer billing surcharge to non-lifeline customers, to
- expenses not specified in paragraph (P)(1) of this rule with a detailed supporting memorandum. one hundred twenty-first day or later date if requested by the company. suspension or commission action, the application shall be deemed approved and become effective on the billing surcharge and its compliance with this rule and must further support its request for recovery of any TP-UNC case purpose code. An applicant must provide documentation to support its proposed customer an application with the commission, using the most up-to-date telecommunications filing form, under the An ILEC ETC requesting recovery of any expenses not specified in paragraph (P)(1) of this rule shall file

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reserved for taxes and government-mandated charges as set forth in 47 C.F.R. 64.2400 to 47 C.F.R. 64.2401. paragraph (P)(1) or (P)(2) of this rule, the lifeline surcharge shall not appear in the section of the bill 0 If an ILEC ETC chooses to establish a customer billing surcharge to recover its lifeline expenses under

- surcharge is sought. Any over-recovery or under-recovery shall be offset against or added to the next docketed in a generic case number to be established by the commission, if no adjustment to the billing accordance with paragraph (P)(1) or (P)(2) of this rule, but shall be provided via a separate filing and any such billing surcharge. The annual filing may be contained in a request to adjust the billing surcharge in shall establish for each such company the timeframe for filing this report when the commission approves ensure that the company did not over recover its approved expenses form customers. The commission and the actual lifeline service discounts and any other lifeline service expenses incurred for the prior period The company shall provide such data as necessary to enable the commission to validate such amounts to (P)(2) of this rule shall annually file with the commission a report that identifies actual amounts recovered year's recovery. An ILEC ETC that is authorized to establish a customer billing surcharge under with paragraph (P)(1) or
- customers who receive, at the time of filing of the report, lifeline service. Every ILEC ETC shall file with the commission in its annual assessment report the number of its
- disconnection of lifeline service shall be provided to commission staff in accordance with rule 4901:1-6-30 of the Administrative Code. Upon request of commission staff, additional information regarding customer subscription to and

LIFELINE REQUIREMENTS

(T)

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offering shall comply with all applicable federal and state laws, including, but not limited to, discriminatory basis to all qualifying low-income customers. The Company's Lifeline service 47 C.F.R. Part 54, Subpart E; the FCC's Lifeline reform order (Report and Order released February any subsequent entries and/or orders. Lifeline service order (Finding and Order adopted May 23, 2012, Case No. 10-2377-TP-COI) and Revised Code; Rule 4901:1-6-19, Ohio Administrative Code; and, the Commission's nontraditional 6, 2012, WC Docket No, 11-42, et. al) and any subsequent clarifying orders; Section 4927.13, The Company shall provide Lifeline service as defined in 47 C.F.R. § 54.401 (a) on a non-

Issued: June 11, 2012

Effective: June 11, 2012

REDACTED — FOR PUBLIC INSPECTION

REDACTED:

Minford Telephone Company

Financial Data 2013